Recipient Committee Campa <u>ig</u> n Statement					Date Stámp	CALIFOR	NIA 460
Cover Page	Stat from _ through	01/01/20 06/30/20	22	Date of election if applicable: (Month, Day, Year)	12.627	Page1	of
1. Type of Recipient Committee All Comm X Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Parly/Central Committee	Primarily For Committee Control Sponso (Also Com)	rmed Bailot Measure led ored orlete Parl 6) rmed Candidate/ Committee		2. Type of Statement: Precipcition Statement: Semi-annual Statement Termination Statement (Atso file a Form 410 Termination) Amendment (Explain Below)		Statement dd-Year Report	
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME (OR CANDID	OMMITTEE)	2022		Treasurer(s) NAME OF TREASURER Monica Intaglietta MAILING ADDRESS	_		-
STREET ADDRESS (NO P.O. BOX)				CITY Santa Barbara, CA 93101	STATE	ZIP CODE	AREA CODE/PHONE
CITY Santa Barbara, CA 93101 MAILING ADDRESS (IF DIFFERENT) NO. AND STREE	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF Jennifer Cooper MAILING ADDRESS	ANY		
CITY Santa Maria, CA 93456 OPTIONAL: FAX / E-MAIL ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE	CITY Santa Barbara, CA 93101 OPTIONAL: FAX / E-MAIL ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preporting under the law	aring and revie vs of the State	wing this stateme of California that	ent and to the best of the foregoing is true	m ar	in and in the atta	ched schedules is	s true and complete. I
Executed onDATE			Ву	_	nt Treasurer		
Executed onDATE			By Signs		roponent or Responsib		
Executed onDATE			Ву	Signature of Controlling Officeholde Signature of Controlling Officeholde			

Recipient Committee Campaign Statement Cover Page - Part 2

	COVE	R PAGE - PART 2
	ORNIA	460
FO	RIVI	400
Page	2 ,	of 22

5. Officeholder or Candidate Controlled Committee		6. Primarily Formed	Ballot Measi	ure Committee		
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE				
Gloria Soto			1			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APP	PLIČABLE)	BALLOT NO. OR LETTER	JURISDICTION			SUPPORT
City Council Member City of Santa Maria	3		<u> </u>			OPPOSE
ESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY S Santa Maria, CA 9	STATE _ ZIP 33458	Identify the controlli any.	ng officehold	ler, candidate, or sta	te measure pro	oponent, if
telated Committees Not included in this Statement: List any controlled by you or are primarily formed.	committees to receive contributions or	NAME OF OFFICEHOLDER, CA	ANDIDATE, OR PRO	PONENT		
nake expenditures on behalf of your candidacy		OFFICE SOUGHT OR HELD			DISTRICT NO. IF ANY	
OMMITTEE NAME	I.D. NUMBER					
AME OF TREASURER	CONTROLLED COMMITTEE? YES NO	7. Primarily Formed officeholder(s) or cand	l Candidate/C lidate(s) for wh	Officeholder Committ nich this committee is p	tee List names primarily formed.	of
OMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	ELD	SUPPORT OPPOSE
	IP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OR HE	ELO	SUPPORT OPPOSE
	I O. NUMBER	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	ELD	SUPPORT
IAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	ELD	OPPOSE SUPPORT
COMMITTEE ADDRESS NO P.O. BO	X)					OPPOSE
TTV STATE 7	IP CODE AREA					

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Column A

TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)

18,125.00

0.00

18,125.00

565.64

18,690.64

5.133.45

565.64

5.699.09

0.00

1,350.00

Schedule A. Line 3 S

Add Lines 1 + 2 \$

Add Lines 3 + 4 \$

Schedule B, Line 3

Schedule C, Line 3

SUMMARY PAGE Statement covers period CALIFORNIA 01/01/2022 from 06/30/2022 of 22 through t.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

Contributions Received

Gloria Soto for Santa Maria City Council District 3 2022

1. Monetary Contributions

2. Loans Received _____

4. Nonmonetary Contributions

3. SUBTOTAL CASH CONTRIBUTIONS.....

5. TOTAL CONTRIBUTIONS RECEIVED.....

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

7/1 to Date 1/1 through 6/30 20. Contributions 0.00 0.00 Received

21. Expenditures Made

0.00

0.00

1407086

Expenditures Made 6. Payments Made Schedule E. Line 4

7. Loans Made Schedule H. Line 3 0.00 8. SUBTOTAL CASH PAYMENTS..... 5,133.45 Add Lines 6 + 7 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 0.00

10. Nonmonetary Adjustment Schedule C, Line 3 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 269.14 18.125.00 13. Cash Receipts..... Column A, Line 3 above 0.00 14. Miscellaneous Increases to Cash Schedule I. Line 4 15. Cash Payments 5,133.45 Column A. Line 8 above 13,260.69 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$

17. LOAN GUARANTEES RECEIVED 0.00 Schedule B. Line 2 \$

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse 19. Outstanding Debts Add Line 2 + Line 9 in Column B above

If this is a termination statement, Line 16 must be zero

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

Column B

CALENDAR YEAR

TOTAL TO DATE

18,125.00

0.00

18.125.00

565.64

18.690.64

5.133.45

0.00

5.133.45

1,350.00

565.64

7.049.09

Expenditures Limit Summary for State Candidates

> 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election Total to Date (mm/dd/yy)

'Amounts in this section may be different from amounts reported in Column B.

> FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Powered by ISPolitical.com

Schedule	A	
Monetary	Contributions	Received

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2022 1407086 IF INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CUMULATIVE TO DATE OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF DATE PER ELECTION TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR AMOUNT RECEIVED CALENDAR YEAR RECEIVED CODE THIS PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) BUSINESS) Retired Anne Schowe ND COM 1,000.00 1,000.00 Retired **П**отн 02/15/2022 SCC Santa Barbara, CA 93110 Investment adivsor Virginia Souza X IND 1,000.00 1,000.00 <u></u> СОМ Morgan Stanley 02/17/2022 Santa Maria, CA 93455 PTY Retired Martha Claus X IND 500.00 500.00 COM Retired 02/23/2022 Pismo Beach, CA 93449 SCC Retired David Dennis [X] IND 1,000.00 1.000.00 COM Retired ОТН 02/23/2022 Santa Maria, CA 93454 PTY Not Employed Connie Ford COM IND 250.00 250.00 Not Employed **□**отн 02/23/2022 PTY Santa Maria, CA 93455 SUBTOTAL \$ 3,750.00

> FPPC Form 450 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

	netary Contributions Received to whole dollars.			1/2022 FOR		DRNIA 46(5 of 22	
NAME OF FILER	for Santa Maria City Council District 3 2022				I.D.	. NUMBER	1407086
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
02/23/2022	Diana Perez Santa Maria, CA 93455	IND COM	Director Allan Hancock College	500.00	500.00		
02/23/2022	Ted Rhodes Carpinteria, CA 93013	NIND COM	Photographer DBA: Ted Rhodes	1,000.00	1,000.00		
02/23/2022	Joseph Visci Pisrno Beach, CA 93449	NIND COM OTH PTY SCC	Retired Retired	500.00	500.00		
02/24/2022	Ken Saxon Santa Barbara, CA 93103-1743	X IND COM OTH PTY SCC	Leadership Development Leading From Within	500.00	500.00		
03/11/2022	Kathy Sharum Santa Maria, CA 93454	N IND □ COM □ OTH □ PTY □ SCC	Retired Retired	1,000.00	1,000.00	· · · · · · · · · · · · · · · · · · ·	

SUBTOTAL \$ 3,500.00

Schedule A Monetary Contributions Received		Amo	ounts may be rounded to whole dollars.	Statement covers	i i	CALIFORNIA 460		
				through06/30/	2022	Page _	6 of	22
NAME OF FILER	for Santa Maria City Council District 3 2022				- (.	.D. NUMBER	1407086	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR 1 (JAN. 1 - DEC	YEAR		ION TO DATE OUIRED)
03/13/2022	Joan Hartmann Buellton, CA 93427	IND COM	Third District County Supervisor County of Santa Barbara	250.00	250.00			
03/25/2022	Laborers Local 220 Political Action Committee Sacramento, CA 95814 ID: 1237416	IND SCC		2,500.00	2,500.0	o		
04/05/2022	Santa Maria Fire Fighters,Local #2020 Santa Maria, CA 93454 ID: #91939	IND SCC		5,000.00	5,000.00	0		
04/12/2022	Friedman for Santa Barbara City Council 2021 Santa Barbara, CA 93101 ID: 1393964	IND SCC		500.00	500.00)		
04/23/2022	David Parker Nipomo, CA 93444	IND COM OTH SCC	Retired Retired	100.00	100.00			
		r			_	<u>.</u> I		

SUBTOTAL \$

8,350.00

Schedule	Α	
Monetary	Contributions	Received

SCHEDULE A

		from01/01/2022 through06/30/2022		FORM 460			
NAME OF FILER	INS ON REVERSE					I.D. NUMBER	
Gioria Soto	for Santa Maria City Council District 3 2022		•		<u>, </u>		1407086
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)
05/16/2022	United Domestic Workers of America Action Fund Sacramento, CA 95814 ID: 1302384	IND COM OTH PTY SCC		500.00	500.0	0	
06/23/2022	Das Williams for Supervisor 2024 Sacramento, CA 95815 ID: 1376702	IND IND OTH PTY SCC		500.00	500.0	0	
06/23/2022	Debra Hood Santa Maria, CA 93455	IND COM OTH SCC	Communications Manager Santa Barbara County Education Office	100.00	100.0	0	
06/23/2022	Patricia Solorio Santa Maria, CA 93454	IND COM OTH PTY SCC	Associate Director Fund for Santa Barbara	250.00	250.0	0	
06/24/2022	Christine Lyon Santa Barbara, CA 93108-1758	IND COM OTH PTY SCC	Retired Retired	250.00	250.0	0	
			SUBTOTAL \$	1,600.00	<u> </u>		WELL

Schedule A Monetary Contributions Received		Amo	ounts may be rounded to whole dollars.	Statement covers period			SCHEDULE CALIFORNIA		
				from	01/01/2	2022	FO	RM 400	
SEE INSTRUCTIO	on reverse			through	06/30/2	2022	Page _	8 of 22	
NAME OF FILER	for Santa Maria City Council District 3 2022						I.O. NUMBER	1407086	
DATÉ RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR .(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RE		CALEND	VE TO DATE IAR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
	Samuel H. Duarte	Director Little House by the Park		250.00 25		250	0.00		
08/27/2022	Santa Maria, CA 93454	COM OTH PTY SCC	Family Service Agency						
	Nancy Grinstein	ND IND	Retired	500.	00	500	0.00		
06/28/2022	Santa Barbara, CA 93110	COM Retired OTH PTY SCC		I HOTH					
Schedule	A Summary		•			[* Contributor	Codes	
	ceived this period - itemized monetary contributions. Schedule A subtotals.)		\$	17,95	00.00	-		ual ient Committee r than PTY or SCC)	
	ceived this period - unitemized monetary contributions of less t	than \$100 — —	\$	3175	.00	-	OTH - Other PTY - Politica	(e.g., business entity)	
	stary contributions received this period. 1 and 2. Enter here and on the Summary Page, Column A, Lin	e 1.)	TOTAL #	. 18,12	25.00		SOO - SIIIAII	Communici Communice	

750.00 SUBTOTAL \$

18,125.00

_ TOTAL \$ _

Schedule	e B -	Part	1
Loans Re	eceiv	/ed	

Amounts may be rounded

SCHEDULE B - PART 1

Loans Received		to whole dollars.			Statement cov	ers period	CALIFORNIA 46	
					from01	/01/2022	FORM	700
					through06	/30/2022	Page 9	of
SEE INSTRUCTIONS ON REVERSE NAME OF FILER			·				I.D. NUMBER	***
Gloria Soto for Santa Maria City Co	uncil District 3 2022							7086
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID FORGIVEN THIS PERIOD **			(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
				☐ PAID				CALENDAR YEAR
				 	 	,	% \$	PER ELECTION**
	:	,		FORGIVEN		RATE		
	i	\$	_{\$}	_{\$}		\$		1
* IND COM OTH PTY SCC	·				DATE OUE	'	DATE INCURRED	
Schedule B Summary								
1. Loans received this period					\$0.00			
(Total Column (b) plus unitemized to	eans of less than \$100.)						* Contributor Code	s
2 Loans paid or forgiven this period					o.00		IND - Individual	
2. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 paid or forgiven) (Include loans paid by a third party that are also itemized on Schedule A.)					5		COM - Recipient C (other than OTH - Other (e.g., PTY - Political Part	PTY or SCC) business entity)
3. Net change this period. (Subtract L.	ine 2 from Line 1.)			NET	\$ 0.00		SCC - Small Contr	
Enter the net here and on the Sumi	mary Page, Column A, Line	2			(May be a negative r	rumber)		

		 ·	 	
•	SUBTOTALS \$	\$ S	\$	

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Schedule B - Part 2 Loan Guarantors		Amounts may be roun to whole dollars.		SCHEDULE B - PART 2 Tent covers period CALIFORNIA A CO				
Loan Guarantors		Stateme from		01/01/2022		¹⁴ 460		
SEE INSTRUCTIONS ON REVERSE			through06	/30/2022	Page 10	of22		
NAME OF FILER Gloria Soto for Santa Maria City Council Distri	ct 3 2022				I.D. NUMBER 1407	086		
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE		
	☐ IND ☐ COM		LENDER		CALENDAR DATE \$ PER ELECTION (IF REQUIRED)			
	OTH PTY SCC		DATE					
			-	· ·		J		

SUBTOTAL	\$ Enter on Summary Page. Line 17 only.

Schedule	C etary Contributions Received		Amounts may be rounded to whole dollars.	l				\$CHEDULE (
Nominone	cary Commons neceived		to whole donars.		Staten	nent covers period	CALIFORN	IA A CC
					from	01/01/2022	FORM	400
					through	06/30/2022	Page11	of 22
SEE INSTRUCTION	ONS ON REVERSE							
	for Santa Maria City Council District 3 2022						I.D. NUMBER 1407	086
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)		PTION OF SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Santa Maria Fire Fighters,Local #2020	□ IND				565.64	5,565.64	
06/23/2022	Santa Maria, CA 93454	COM OTH PTY		Fo	ood			
	ID: 891939	⊟ scc						
Schedule	C Summary						* Contributor Codes	<u>. </u>
(Include all : 2. Amount rec 3. Total nonm	served this period - itemized nonmonetary contribution Schedule C subtotals.)	ions of less tha		\$	·	0.00	IND - Individual COM - Recipient Com (other than PT OTH - Other (e.g., bus PTY - Political Party SCC - Small Contribut	Y or SCC) siness entity)
(add Lines 1	I and 2. Enter here and on the Summary Page, Colur	nn A, Lines 4 a	nd 10.)	_TOTAL \$	56	65.64		

Schedule D Amounts may be rounded **Summary of Expenditures** to whole dollars. Statement covers period **CALIFORNIA** Supporting/Opposing Other Candidates, Measures, and Committees **FORM** 01/01/2022 06/30/2022 12 _ of _ 22 through NAME OF FILER I.D. NUMBER Gloria Soto for Santa Maria City Council District 3 2022 1407086 NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR **CUMULATIVE TO DATE** PER ELECTION TO DATE DATE DESCRIPTION AMOUNT CALENDAR YEAR MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) (IF REQUIRED) THIS PERIOD TYPE OF PAYMENT OR COMMITTEE (JAN. 1 - DEC. 31) Central Coast Labor Council Monetary Contribution Nonmonetary 400.00 400.00 05/23/2022 Contribution DISTRICT #: Independent Expenditure X Support Oppose **SCHEDULE D SUMMARY** 400.00 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)

SUBTOTAL \$ 400.00

0.00

400.00

2. Unitemized contributions and independent expenditures made this period of under \$100

3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)

Schedule E	Ē
Payments	Made

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

					SCHEDULE E
ſ	Statement	covers period	CALIF	DRNIA	160
	from	01/01/2022	FO	RM	400
	through	06/30/2022	. Page _	13 c	of
	-		I.D. NUMBER		
			ı	140708	6

Gloria Soto for Santa Maria City Council District 3 2022

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants
CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Integrated Solutions: Political San Diego, CA 92116	OFC		75.00
Integrated Solutions: Political San Diego, CA 92116	OFC		75.00
First Data Atlanta, GA 30342	OFC		184.55
C&I Consulting Santa Barbara, CA 93101	CNS		750.00
Payments that are contributions or independent expenditures must also be summarized on Sc	nedule D.	SUBTOTAL \$	1,084.55

Schedule E	
Payments Made	

NAME OF FILER
Gloria Soto for Santa Maria City Council District 3 2022

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants

SEE INSTRUCTIONS ON REVERSE

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
First Oata Atlanta, GA 30342	OFC		43.95
Integrated Solutions: Politicat San Diego, CA 92116	OFC		75.00
C&I Consulting Senta Barbara, CA 93101	CNS		750.00
C&I Consulting Santa Barbara, CA 93101	CNS		750.00
* Payments that are contributions or independent expenditures must also be summarized on Scho	dule D.	SUBTOTAL \$	1,618.95

Schedule E	
Payments Made	

SCHEDULE E Statement covers period **CALIFORNIA FORM** 01/01/2022 from 06/30/2022 22 15 _ of _ through I.O. NUMBER 1407086

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2022

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL 1.v. or cable airtime and production costs TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID	
Integrated Solutions: Political San Diego, CA 92116	OFC		75.00	
Central Coast Labor Council Camarillo, CA 93012 ID: 890222	СТВ		400.00	
First Data Atlanta, GA 30342	OFC		39.95	
C&l Consulting Santa Barbara, CA 93101	CNS		750.00	
Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$				

Schedule E	
Payments Made	

SCHEDULE E Statement covers period 01/01/2022 from 06/30/2022 22 of _ through . I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Gloria Soto for Santa Maria City Council District 3 2022 1407086

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. RFD_returned contributions CNS campaign consultants MTG meetings and appearances CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries TEL t.v. or cable airtime and production costs CVC civic donations PET petition circulating PHO phone banks TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events POS postage, delivery and messenger services IND independent expenditure supporting/opposing others (explain)* TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads NAME AND ADDRESS OF PAYEE CODE OR AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) DESCRIPTION OF PAYMENT Integrated Solutions: Political OFC 75.00 San Diego, CA 92116 JVF Web Design 900.00 WEB Los Angeles, CA 91345 Schedule E Summary

975.00 SUBTOTAL \$ Payments that are contributions or independent expenditures must also be summarized on Schedule D.

1. Itemized payments made this period. (Include all Schedule E subtotals.)

2. Unitemized payments made this period of under \$100

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)

_____TOTAL \$

4.943.45

190.00

0.00

5.133.45

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period from 01/01/2022 CALIFORNIA 460 FORM FORM 17 of 22 I.O. NUMBER 1407086

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gloria Soto for Santa Maria City Council District 3 2022

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
C&I Consulting Santa Barbara, CA 93101	PRO	150.00	0.00	0.00	150.00
C&I Consulting Santa Barbara, CA 93101	PRO '	150.00	0.00	0.00	150.00
C&I Consulting Santa Barbara, CA 93101	PRO	150:00	0.00	0.00	150.00
C&I Consulting Santa Barbara, CA 93101	PRO	150.00	0.00	0.00	150.00
Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 600.00	\$ 0.00	\$ 0.00	\$ 600.00

Schedule F		
Accrued Expenses	(Unpaid	Bills)

	SCHEDOLE P
Statement covers period	CALIFORNIA 1 CO
from01/01/2022	FORM 400
through06/30/2022	Page18 of22
	1.0. NUMBER 1407086

COLLEGE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

Gloria Soto for Santa Maria City Council District 3 2022

LEG legal defense

UT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meats

TRS staff/spouse travel, lodging, and meats

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
C&I Consulting Santa Barbara, CA 93101	PRO	150.00	0.00	0.00	150.00
C&L Consulting Santa Barbara, CA 93101	PRO	150.00	0.00	0.00	150.00
C&I Consulting Sama Barbara, CA 93101	PRO	150.00	0.00	0.00	150.00
C&I Consulting Santa Barbara, CA 93101	PRO	150.00	0.00	0.00	150.00
Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 600.00	\$ 0.00	\$ 0.00	\$ 600.00

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.	Statement from	ent covers period 01/01/2022 06/30/2022	CALIFORNIA 4 (FORM) Page 19 of 2
NAME OF FILER		•		I.D. NUMBER
Gloria Soto for Santa Maria City Council District 3 2022				1407086
CODES: If one of the following codes accurately describes the pa CMP campaign paraphenalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	yment, you may enter the code. Otherwise, digital MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RA RF SA TE TR TR TS VO	D radio airtime and product preturned contributions as campaign workers' salarit. t.v. or cable airtime and p C candidate travel, lodging statt/spouse travet, todging fransfer between committed.	es roduction costs , and meals ng, and meals tees of the same candidate/sponsor

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(C) . AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE A' CLOSE OF THIS PERIOD
C&I Consulting Santa Barbara, CA 93101	PRO	150.00	0.00	0.00	150.00
CHEDULE F SUMMARY Total accrued expenses incurred this period. (Include all Schedule F, Co				WOULDSED TOTAL O	0.00
accrued expenses of \$100 or more, plus total unitemized accrued expense. Total accrued expenses paid this period. (Include all Schedule F, Colum accrued expenses of \$100 or more, plus total unitemized payments on a	nn (c) subtotals for payment			NCURRED TOTALS	
 Net change this period. (Subtract Line 2 from Line 1. Enter the difference on the Summary Page, Column A, Line 9.) 	e here and			MET	\$ 0.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTALS \$ 150.00 \$ 0.00 0.00 \$ \$ 150.00

SCHEDULE F

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)
onication (on Bonan or Time Committee)

_		SCHEDULE G
Statement covers period		CALIFORNIA 460
from	01/01/2022	FORM 400
through _	06/30/2022	Page
•		I.D. NUMBER 1407086

Gloria Soto for Santa Maria City Council District 3 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants

SEE INSTRUCTIONS ON REVERSE

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS_staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER (.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
,				
		İ		
		İ		
		_		

** Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

TOTAL * S

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule H		Ame	ounts may be round	ed				SCHEDULE
Loans Made to Others*			to whole dollars.		Statement cove	ers period	CALIFORNI FORM	^A 460
					from01/0	01/2022	FORIN	-100
					through06/3	30/2022	Page 21	_ of22
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Gloria Soto for Santa Maria City Co	ouncil District 3 2022	<u> </u>	·				I.D. NUMBER 1407	7086
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT FORGIVENESS T PERIOD *		(e) INTEREST RECEIVED	(I) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID		·		CALENDAR YEAR
				\$FORGIVEN	[\$	RATE	· \$	PER ELECTION"
	1							

SUBTOTALS \$

\$

\$

\$

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E

Schedule I			
Miscellaneous	Increases	to	Cash

SCHEDULE I CALIFORNIA A Statement covers period

	01/01/2022	FORM 4	.6 (
from		L	

06/30/2022 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Gioria Soto for Santa Maria City Council District 3 2022

I.D. NUMBER 1407086

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
Schedule	Summary		

1. Itemized increases to cash this period.	.\$ _	0.00
2. Unitemized increases to cash of under \$100 this period.		
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	.s _	0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the	Ψ —	

Summary Page, Line 14.) _____ TOTAL \$ ____